

In conclusion it may be well again to quote from the classic paper of Harvey Cushing. "The surgical specialties . . . should represent merely grafts on the parent stem, for in their cultivation as separate plants they may cease to blossom and to bear fruit. . . . When progress ceases to be made, through the intensive studies which the smaller field of work permits, there is every reason why the vagrant specialty should be called back under the wing of its parent,

general surgery, from whom in no circumstances should it ever be permitted to wander too far."

#### REFERENCES

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2. Halsted, *Bull. John Hopkins Hospital*, 23:191, 1912.
3. Lister, J., *Edinburg M. J.*, 21:481, 1875.
4. Matas, R., in *Keen's Surgery*, Vol. 5, Philadelphia and London, W. B. Saunders Company, 1909.



## That Dodo Again

Without belaboring our dear dead friend the dodo, may we make one more reference to him in connection with the drive for compulsory health insurance. The simile is wearing a little thin by now and the latest blast from a high place should prove conclusively that the politically-inspired movement to execute a system of compulsory health insurance is far from the condition of death attributed to our erstwhile feathered companion.

Latest in the string of dignitaries to espouse compulsory health insurance is Bernard Baruch, elder statesman, philanthropist, counsel to presidents, benefactor of the medical arts, and the son of a physician. Speaking before a meeting of six hundred doctors in New York, Mr. Baruch pleaded for medical participation in the plan to enact a compulsory health insurance law. He cited the rejection of four million potential draftees as a shocking situation, declared that voluntary health insurance "is not good enough," stated that a "sizable segment of society does not earn enough to pay for voluntary insurance" and concluded that a national scheme of compulsory health insurance was the only answer. Mr. Baruch urged the doctors to get behind this movement, rather than stand on the sidelines while it developed. He said that a form of compulsory health insurance can be devised "without the Government taking over medicine, something which I would fiercely oppose."

Coming from such an eminent citizen as Mr. Baruch, these statements carry more weight than from the lips of a known government-employee propagandizer. The same fallacies attend such remarks in either case, but the prominence of the

speaker lends extra weight to them in the public mind. Apparently Mr. Baruch has been taken in by the same type of propaganda which the President and his predecessor backed and which has been traced to its birthplace by a vigilant congressional committee.

Medical men and students of the movement for compulsory health insurance laws are aware of the fallacies of these oft-repeated arguments. They know the meaninglessness of the draft rejection figures. They know that Government would surely "take over medicine" if a compulsory health insurance law were adopted. They know that the voluntary systems of medical care insurance are within and not beyond the means of the ordinary wage-earner. They know that the idealistic propaganda of Messrs. Falk & Co. is studded with inaccuracies, misstatements and glossy covers for regimentation. The surprising part of it all is that Mr. Baruch, familiar with the ways of bureaucrats, should be taken in by this sort of program.

The only answer which immediately comes to mind on that point is that in his role of presidential adviser Mr. Baruch is bound to repeat the same arguments that our latest two chief executives have received from inspired sources. At the same time, he has hedged these arguments somewhat in deploring a political takeover of medicine; this may be a straw in the wind as to new techniques by the social planners.

Agitation for compulsory health insurance may be, as some medical men claim it is, as dead as a dodo. After looking at Mr. Baruch's latest contribution, we venture again to question that assertion.